PART B - FEE(S) TRANSMITTAL

•	Complete and send	this form, together wi	th applicable f	ee(s), to: <u>M</u> or <u>I</u>		Mail Stop ISSUI Commissioner fo P.O. Box 1450 Alexandria, Virg (571) 273-2885	or Patents		
M.	INSTRUCTIONS: This for appropriate All further complete and inless corrected maintenance fee notification	orm should be used for transpression or directed otherwise	smitting the ISSU Patent, advance or in Block 1, by (a	JE FEE and learn and learn and noting and specifying a	PUBLIC fication a new c	OATION FEE (if requ of maintenance fees v orrespondence address	sired). Blocks 1 through 5 will be mailed to the curren ; and/or (b) indicating a sep	should be completed where t correspondence address as parate "FEE ADDRESS" for	
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12/7	20/2005 HVUONG2 0000			An	$\sim 10^{-10}$ (Sig				
	C:2501 700.00 OP				(Date)				
עב ו	C18001 30.00 8P APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
	09/577,961 05/24/2000			David I. Durst			TDT-206	6122	
	TITLE OF INVENTION: AUTHENTICATION METHOD AND SYSTEM						•		
	APPLN, TYPE	APPLN, TYPE SMALL ENTITY ISSUE F		EE P		JBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
	nonprovisional					\$0	\$700	12/16/2005	
	EXAMINER ART		ART UN	NIT C		LASS-SUBCLASS	1		
			2132			713-176000	J		
	CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
	3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PLEASE NOTE: Unless an assignee is identified below, no assignee data recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a st				IE PATENT (print or type) ta will appear on the patent. If an assignee is identified below, the document has been filed for a substitute for filing an assignment.				
	(A) NAME OF ASSIGN	B) RESIDENCE: (CITY and STATE OR COUNTRY)							
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	Issue Fee	☑ A check in the amount of the fee(s) is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached.							
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	This collection of informati an application. Confidential submitting the completed a this form and/or suggestion Box 1450, Alexandria, Virg Alexandria, Virginia 22313	on is required by 37 CFR 1.3 lity is governed by 35 U.S.C pplication form to the USPT s for reducing this burden, slginia 22313-1450. DO NOT 1450.	11. The information. 122 and 37 CFR O. Time will vary nould be sent to the SEND FEES OR C	on is required to 1.14. This collidered up depending up to Chief Information COMPLETED	to obtain lection on the nation C FORM	n or retain a benefit by is estimated to take 12 individual case. Any confficer, U.S. Patent and S TO THIS ADDRES.	the public which is to file (ar minutes to complete, includi omments on the amount of t Trademark Office, U.S. Dep S. SEND TO: Commissioner	nd by the USPTO to process) ng gathering, preparing, and ime you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450,	

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